THE AMERICAN LEGION, DEPARTMENT OF MICHIGAN **EXPENSE VOUCHER**

Name: Title or Committee: Date: _____

Date	City/Event	Miles Driven	Amount @ IRS Rate	Mileage	Parking	Meals	Postage	Awards	Supplies	Total
			0.405	$ -						$ -
			0.405	$ -						$ -
			0.405	$ -						$ -
			0.405	$ -						$ -
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			0.405	$ -						$ -
				$ -						

Grand Total: $ -

Signature:

Address:

Chairman Aprroval:

Date:

Telephone:

Comments: